



CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

herein and in any attached schedules is true and complete. I ac I certify under penalty of perjury under the laws of the State

Date Signed

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STATEMENT OF ECONOMIC INTERESTS

MAR 0/6 2013

LIEULERKS OFFICE PM 12: 03 Please type or print in ink. NAME OF FILER (LAST) (FIRST) Veivoda M Craia 1. Office, Agency, or Court Agency Name Tulare City of Division, Board, Department, District, if applicable Your Position City Council Member If filing for multiple positions, list below or on an attachment.
Tulure County Treas portator Attachy Association of Government Position: Member 2. Jurisdiction of Office (Check at least one box) ☐ State Judge or Court Commissioner (Statewide Jurisdiction) Excounty of Twee ☐ Multi-County __ City of Tulare Other _ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2012, through Leaving Office: Date Left ____/__ December 31, 2012. (Check one) -01-O The period covered is January 1, 2012, through the date of The period covered is ______, through leaving office. December 31, 2012. O The period covered is _______ the date of leaving office. Candidate: Election year __ and office sought, if different than Part 1: _ 4. Schedule Summary ► Total number of pages including this cover page: _____ Check applicable schedules or "None." Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-None - No reportable interests on any schedule

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%) Do not attach brokerage or financial statements.

CALIFORNIA FORM 70	00
FAIR POLITICAL PRACTICES COMMISS	ION
Name	
Craig M Vejvoda	

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Galaxy Theatres Tulare GENERAL DESCRIPTION OF BUSINESS ACTIVITY	}
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Movie Theatre	
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$100,000 ☐ \$100,000 ☐ Over \$1,000,000	\$2,000 - \$10,000
	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 12	12
NAME OF RUSINESS ENTITY	NAME OF BUSINESS ENTITY
Galaxy Theatres Gig Harbor GENERAL DESCRIPTION OF BUSINESS ACTIVITY	IVANUE OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	GENERAL BESCRIPTION OF BUSINESS ACTIVITY
Movie Theatre	
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$100,000 ☐ \$100,000 ☐ Over \$1,000,000	\$2,000 - \$10,000 S10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Cother	☐ Stock ☐ Other
(0escribe) Partnership O Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 12 / / 12	// 12/ / 12
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	CENEDAL DECODIDATION OF PHONESO ASSUME
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000 S10,001 - \$100,000	\$2,000 - \$10,000 S10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF WARETARNET
Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
C C C C C C C C C C C C C C C C C C C	C modified to \$300 of Wiole (Napoli on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACOUIRED DISPOSED	ACQUIRED DISPOSED
•	•
Comments:	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

FAIR POLITICAL PRACTICES COMMISSION	LIFORNIA FORM	
Name Craia M Vejvoda		voda

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Vejvoda Financial Services	Name
260 North M. St. Tware CA 93274 Address (Business Address Acceptable)	
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
lasurance and financial Adison	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 · \$10,000	\$2,000 · \$10,000
☐ \$10,001 - \$100,000 ACQUIRED DISPOSED □ ★\$100,001 - \$1,000,000	\$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION D wher	YOUR BUSINESS POSITION
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
☐ \$0 - \$499 ☐ \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
☐ \$500 - \$1,000	\$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Altach a separate sheet if necessary)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
None	None
Principal Life Princip Financial Sorvices	
Corp., Anthem Blue Cross, Care Trust Networ	
➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000	\$2,000 · \$10,000 \$10,001 · \$100,000
S100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	S100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
•	· •

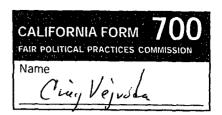
Comments:____

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700
- FAIR POLITICAL PRACTICES COMMISSION
Name
Craig Vejvoda

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
	f 1
1926 Cabernet	200 North M St
CITY	CITY
Tulare CA 93274	Tulare CA 93274
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 10,001 - \$100,000 12 12 12 12 12 12 12
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
← Notice	None
You are not required to report loans from commercial le business on terms available to members of the public loans received not in a lender's regular course of business.	ending institutions made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
S500 - \$1,000 S1,001 - \$10,000	5500 - \$1,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 \text{\$\text{\$\subset\$00,000}}\$
_	[] CALK \$100,000
Guarantor, if applicable	Guarantor, if applicable
Comments:	

SCHEDULE D Income - Gifts



► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
League of CA (ities SSOV Division	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
P.O. B.x 10656, Bakersfield, CA	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Executive Board Meetings	Ì
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
1,12,12 , 29,49 (, , , ,)	s
318/12 534,50 Super	
5,10,12 532.51 Supper	
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
Learne of CA Cities	}
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
· · · · · · · · · · · · · · · · · · ·	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Exec bound Mtss	Table to the time to the table to t
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
7 19 12 2501	
7,19,12 ,35,96 Supper	
9,20,12 5 36.29 Supper	
11/8/12 531.89 Supper	
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
,	The state of the s
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
]	
s	
\$	
i	
Comments:	